



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. E314280

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

TRIBAL RESERVATION

CASE #	1400584
LOCAL AGENCY CODING	
TOTAL # OF UNITS	02
OBJECT STRUCK	

M M D D Y Y Y Y	TIME (2400)	COUNTY #	MILES	CITY #
DATE OF COLLISION 03 - 13 - 2014	1211	31		0664
N S E W IN OF				

ON (PRIMARY TRAFFIC WAY) INTERSECTION ☒ NON-INTERSECTION ☐

MARKET PLACE	BLOCK NO.
	MILE POST

DISTANCE	MILES	N E	OF (REFERENCE OR CROSS STREET)
	FEET	S W	SR204

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 4255011762
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LAST NAME	PHILLIPS	FIRST NAME	JENNIFER	MIDDLE INITIAL	A
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STREET NEW ADDRESS	5008 GRAHAM WAY #B
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CITY	MUKILTEO	ST	WA	ZIP	98275
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	PHILLJA190JE	STATE	WA	SEX	F	D.O.B.	MMDDYYYY	04	05	1981
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR.	6	EJECT	1	HELMET USE	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	ALK7023	STATE	WA	VIN#	2FMZA51646BA54991
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TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	2006	MAKE	FORD	MODEL	FREEST	STYLE	VN	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. OWNED BY DRIVER

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	GEICO 4283266237
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VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE
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UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	PHONE D: 4253445926
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LAST NAME	FERWERDA	FIRST NAME	THYS	MIDDLE INITIAL	J
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STREET NEW ADDRESS	6925 47TH AVENUE NE #48
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CITY	MARYSVILLE	ST	WA	ZIP	98270
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	FERWETJ125KR	STATE	WA	SEX	M	D.O.B.	MMDDYYYY	05	19	1988
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	B36748T	STATE	WA	VIN#	1GCGK29R0OYFA474691
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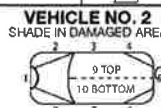
TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	2000	MAKE	CHEV	MODEL	C2	STYLE	VN	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	OHIO SECURITY INSURANCE BAS55544890
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VEHICLE LEGALLY STANDING YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE
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OFFICER'S NAME (PRINT)	BADGE OR ID #	AGENCY
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R. RUTHERFORD	130	WA0311900
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PART A 3000-345-159 R (7/06)

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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. E314280

CASE #

1400584

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		PHILLIPS IVY																
ADDRESS & PHONE #		1014 35TH STREET EVERETT WA 98201																
SEX		F		D.O.B. MM/DD/YYYY		10		13		2013								
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	1	SEAT POS.	7	AIRBAG	2	RESTR.	6	EJECT	1	HELMET USE		INJURY CLASS	1	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #																		
SEX				D.O.B. MM/DD/YYYY														NATURE OF INJURIES
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #																		
SEX				D.O.B. MM/DD/YYYY														NATURE OF INJURIES
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES

NARRATIVE

At 1211 hours, Lake Stevens units were dispatched to SR204 just south of Lundeen Parkway for a two vehicle non-injury and non-blocking collision. Upon arrival, I observed two vehicles off the side of the roadway. I contacted both driver's. The driver of vehicle #1 indicated that she was following vehicle #2 from Market Place onto SR 204. The driver of vehicle 2 stated that she thought it was ok to check on her infant child in the rear child seat and turned her head for a moment. The driver of vehicle two had stopped for traffic and was rear ended by vehicle 1. Driver of vehicle 1 had a 5 month old child in a car seat in the middle seat of the van. The driver of vehicle 1 declined aid to examine the child..

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

R. RUTHERFORD

03-14-14 04:02 PM

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

DATED

PLACE SIGNED

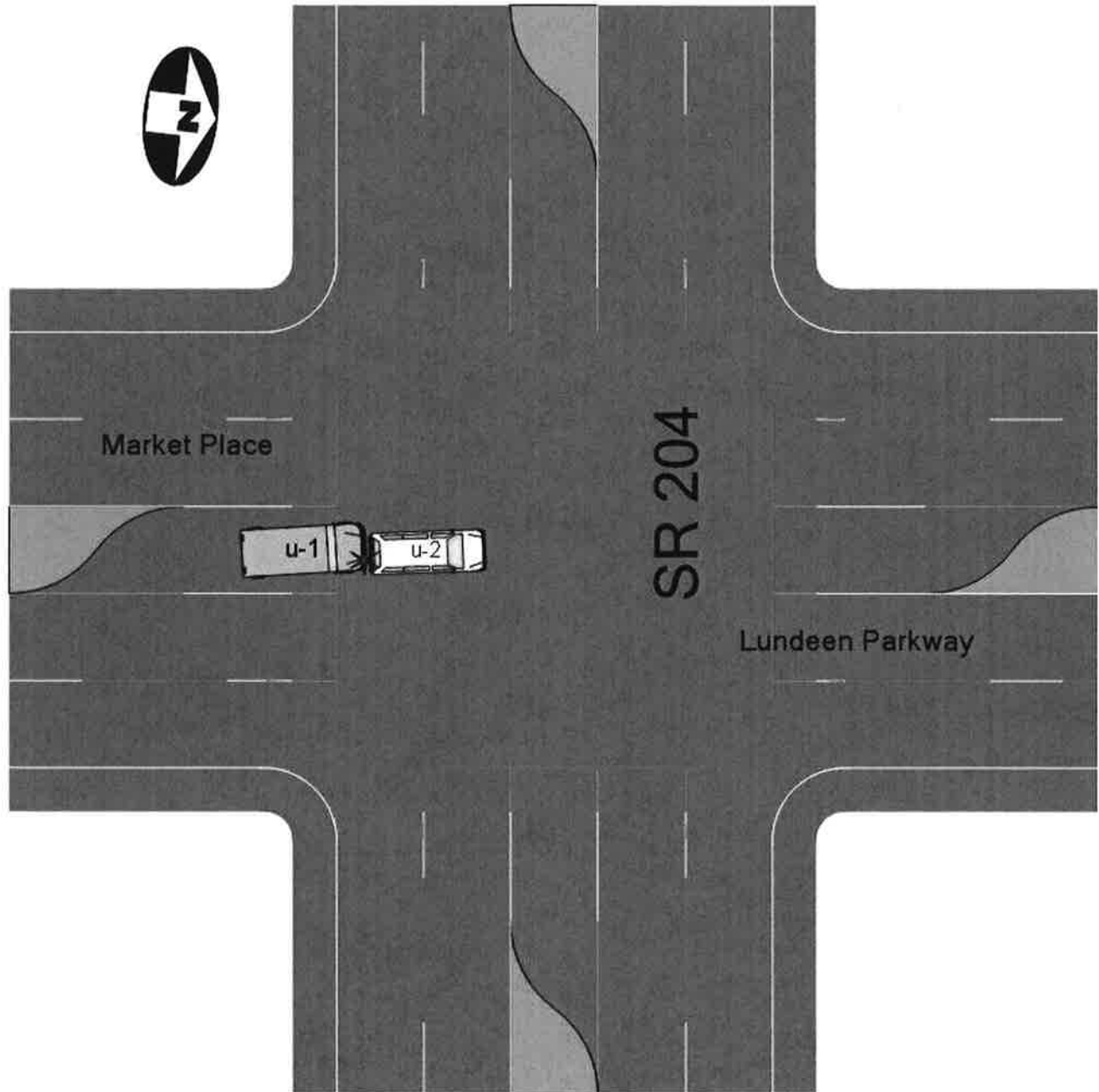
APPROVED BY

DATE

BOB SUMMERS 079

3/15/2014 1:14:58 AM

BADGE OR ID #	130	ORI #	WA0311900	TIME POLICE DISPATCHED	12:12 PM	TIME POLICE ARRIVED	12:15 PM
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LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

14-00584

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Phillips, Jennifer A	RACE W	ETH	SEX F	DOB 4/5/81	AGE 32	HGT 5'6"	WGT 115	HAIR B	EYES B
STREET ADDRESS 1014 35th St		CITY Everett		STATE WA		ZIP 98201		RES. STATUS Home Rent		
HOME PHONE (425) 501-1762		CELL PHONE same			PLACE OF EMPLOYMENT					
WORK PHONE		EMAIL ADDRESS jeniferap81@gmail.com								

I, _____, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

The guy ahead of me started to go flight turned green, so I followed in suit, and thought I'd have time to turn around and check my infant in the back seat, after I turned forward, I saw the gentleman had stopped. I slammed on breaks and ~~then~~ run into the back of his van.

Phillips,

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <i>Jennifer Phillips</i>	DATE SIGNED 3/13/2014	LOCATION SIGNED Lake Stevens, WA
OFFICER/NUMBER: <i>Porter #130</i>	DATE SIGNED 3/13/14	LOCATION SIGNED LAKE STEVENS, WA

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

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LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

14-00584


VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Ferwerda Thys Jeffery	RACE W	ETH	SEX M	DOB 5-19-88	AGE 25	HGT 6'1"	WGT 160	HAIR BRN	EYES BRN
STREET ADDRESS 3011 184th PL NE		CITY Arlington			STATE WA		ZIP 98223		RES. STATUS	
HOME PHONE 425-343-9660		CELL PHONE 4			PLACE OF EMPLOYMENT Jeff's carpet cleaning					
WORK PHONE		EMAIL ADDRESS Tferwerda 0023@gmail.com								

I, _____, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was waiting to make a left hand turn onto Hwy 204. I saw a car come over the hill, so I decided to wait. I checked my side mirror ~~the~~ and saw the car heading towards mine. I went to move forward to avoid being hit, but it was too late. The driver of the other vehicle said she did not see that I hadn't turned, because she was checking on her baby.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED 3-13-14	LOCATION SIGNED Lake Stevens, WA
OFFICER/NUMBER: #130	DATE SIGNED 03/13/14	LOCATION SIGNED LAKE STEVENS WA

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Richard Rutherford

From: Jenifer Phillips [jeniferap81@gmail.com]
Sent: Thursday, March 13, 2014 4:03 PM
To: Richard Rutherford
Subject: Re: Collision

Ivy Phillips
10/13/2013

Sent from my iPhone

On Mar 13, 2014, at 2:22 PM, <rrutherford@lakestevenswa.gov> wrote:

Hi Ms. Phillips,

I neglected to get the information on your child that was involved in the crash on 03/13/2014. If possible could you E-mail me the child's full name, and date of birth.

Thank you,

Officer Richard Rutherford #130
Lake Stevens Police Department
(425) 334-9537

LSPD
OFFICIAL

Incident History for: #SS14004776

Case Numbers: \$SS14000584

Entered 03/13/14 12:11:38 BY SPCT06 SP0371
Dispatched 03/13/14 12:12:34 BY SPDP17 SP0120
Enroute 03/13/14 12:12:34
Onscene 03/13/14 12:15:18
Closed 03/13/14 12:46:07

Initial Type: COL Initial Alarm Level: Final Alarm Level:

Final Type: COL (COLLISION, NON-PRIORITY) Pri: 2 Dispo: H

Police BLK: SS002 Fire BLK: AG1518 Map Page: 377D-7 Group: SS1 Beat: WEST

Src: T

Loc: LUNDEEN PARK WY/SR 204 , LKS (V)

Loc Info: ON SR 204 SO LOC

Name: FERWERDA, THYS

Addr:

Phone: 4253439660

/1211 (SP0371) ENTRY , CC, NOW, NON INJURY NON BLKING, WHI CHEVY EXPRE
SS VS GRYFORD VAN, NORTH SIDE OF ROAD
/1212 (SP0120) AGCADV , BRDCST
/1212 DISPER 19S15 #SS75 CHRISTENSEN, OFCR (CHAD)
#SS130 RUTHERFORD, OFCR (RICH)
/1212 ASST 19D2 #SS112 WARBIS, OFFICER (STEVE)
/1212 ASSTER 19D3 #SS120 BERNHARD, OFFICER (KERRY)
/1212 ENROUT 19D2
/1215 ONSCNE 19S15
/1216 (SS120) CLEAR 19D3
/1219 (SP0120) ASNCAS 19S15 \$SS14000584
/1223 (SS112) *ONSCNE 19D2
/1227 (SP0120) CLEAR 19D2 , D
/1246 CLEAR 19S15 D/H
/1246 CLOSE 19S15

ORIGINAL